

Parent/Guardian Information Letter for *SurveyWorks!*

Dear Parent/Guardian,

The Rhode Island Department of Education (RIDE) is working with your local school district to offer the state's new student survey, SurveyWorks!. WestEd, our vendor, will administer the survey online to help local schools, school districts, and RIDE improve our schools and support better teaching and learning for all students in Rhode Island. The information collected from this survey will help educators working in Rhode Island improve curriculum, school climate, and other school-based programs. Schools, districts, parents, and groups that support schools may use the survey results to better understand issues and conditions that get in the way of students' achieving their fullest potential.

All Rhode Island students in grades 4 through 12 are being asked to participate in this online survey at their own school. There are no academic or physical tests involved in the survey and it will take a student take about 25 minutes to complete. Your child's participation in the survey is voluntary and anonymous; no names will be used or reported. The surveys are available for you to review on the RIDE website at <http://www.ride.ri.gov/PSI/SupportIntervention/DataWorks/SurveyWorks.aspx> and at the school office.

The survey will ask questions about:

- | | | |
|------------------------------------|-------------------------------------|----------------------------------|
| • College and career readiness | • Nutrition and physical activity | • Tobacco, alcohol, and drug use |
| • School climate | • Learning activities | • Technology use |
| • Teacher expectations | • The condition of school buildings | • Truancy * |
| • School support | • Access to resources | • Mental health* |
| • Family and community involvement | • School safety | • Sexual activity** |
| | • Bullying | • Lifestyle choices** |

* Middle school and high school survey topic

** High school survey topic only

Certain students may feel uncomfortable answering some of these questions, therefore a school counselor or other qualified professional will be available to assist any student who becomes uncomfortable or simply wishes to discuss some items or topics.

Getting results that represent your child's school depends on having as many children to participate as possible. You may release your child from taking the survey at any point in the process without penalty. If your child does take the survey, he/she may skip any question they don't want to answer, or may even stop taking the survey. If you have any additional questions about this survey, please contact the SurveyWorks! Help Desk between 8am and 4pm EST at 1-877-787-5725 or surveyworks@wested.org. For questions or concerns about your child's rights as a research subject, you may contact WestEd's Office of Research Integrity at (877) 493-7833, ext. 3202 or subjects@wested.org (to learn more about WestEd, please visit www.wested.org) If you do not want your child to participate, please complete the attached form as soon as possible. The school will assume that you give your child permission to take survey if you do not return this slip within four weeks. If you change your mind after that time period, you may e-mail or call the school to let them know. You may return the form to the school office in person yourself, by mail, or by your student returning it for you. Please let your child know if they will or will not be taking the survey, they will be given another kind of school activity to do during the survey time. Thank you for your cooperation with this important effort.

**2010 Rhode Island Department of Education School Survey
OPT-OUT FORM**

Complete this form **only** if you **do not** wish your child to participate in the survey. Return it to your child's school within four weeks.

I **do not give permission** for my child to participate in the confidential 2010 Rhode Island Department of Education *SurveyWorks!* Survey. I understand that my child will be assigned to a different activity during the administration of the survey.

Student's Name (please print): _____

Student's School (please print): _____ Grade: _____

Signature of Parent or Guardian: _____

*Please return this page to your student's school office ONLY if you **do not** wish your student to participate.*